

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073



FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

SHIPMENTS
DELIVERY 1

IA ETHICS AND
CAMPAIGN DISCLOSURE
UPS

2008 OCT 30 AM 9:52

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Richards

IMPORTANT: Indicate by # type of committee you are reporting for: ☐

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Stephen D. Richards

Political Party (if applicable)

Republican

Office Sought

Iowa House District 8

District (if Senate or House)

House District #8

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

1728

5

2

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Stephen D. Richards, Treas.
SIGNATURE OF PERSON FILING REPORT

515-295-7275
TELEPHONE

10/29/08
DATE SIGNED

I AM FILING A Oct. 15 - Oct. 28, 2008 REPORT FOR (1) ELECTION //(2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$

5,444.55

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

11,625.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$

17,069.55

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

16,769.00

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$

300.55

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

\$

0

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

\$

18,397.27

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

\$

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES X NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens For Richards

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
10/17/08	ID# CK#	Team PAC Iowa #9775 400 Locust St., Suite 330 Des Moines, IA. 50309		\$ 1,000.00	<input type="checkbox"/>
10/17/08	ID# CK#	Harold Prior 1600 Jay Loe Lane-Wahpeton Milford, IA. 51351		50.00	<input type="checkbox"/>
10/21/08	ID# CK#	Team PAC Iowa #9775 400 Locust St., Suite 330 Des Moines, IA. 50309		10,000.00	<input type="checkbox"/>
10/28/08	ID# CK#	Iowa Osteopathic PAC #6076 950 - 12th St. Des Moines, IA. 50309		250.00	<input type="checkbox"/>
10/28/08	ID# CK#	C.B. Loteyro 4285 Windsong Place Plover, WI. 54467		100.00	<input type="checkbox"/>
10/28/08	ID# CK#	William S. Brown, Jr. 4577 280th Street Gracettinger, IA. 51342		200.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#	"Unitemized Contributions for the Period"		2500	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 11,625.00	
TOTAL (if last page of this schedule)				\$ 11,625.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Richards

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID-NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10/19/08	ID# CK#	Republican Party of Iowa 621 E. 9th Des Moines, IA. 50309	Reimburse TV ads, brochures	\$ 1,000.00
10/24/08	ID# CK#	Republican Party of Iowa 621 E. 9th Des Moines, IA 50309	Reimburse TV ads, brochures	10,000.00
10/27/08	ID# CK#	Victory Enterprises 5200 SW 30th St, Ste. 7 Davenport, IA. 52802	4500 - 2 page letters and postage	2819.70
10/27/08	ID# CK#	Victory Enterprises 5200 SW 30th St, Ste. 7 Davenport, IA 52802	Creation and Production of Radio Ad	150.00
10/27/08	ID# CK#	Victory Enterprises 5200 SW 30th St, Ste. 7 Davenport, IA 52802	4368 - mailings of "Flower pot" Flats and postage	2266.56
10/28/08	ID# CK#	Victory Enterprises 5200 SW 30th St, Ste. 7 Davenport, IA 52802	Ft. Dodge Messenger newspaper ad	510.97
10/28/08	ID# CK#	Kossuth Regional Health Center 1515 S. Phillips Algona, IA. 50511	postage and processing mailing	2.02
10/28/08	ID# CK#	Erpelding Voigt & Co. LLP 307 East Call St. Algona, IA 50511	postage reimbursement	19.75
SUB-TOTAL				\$ 16,769.00
TOTAL (if last page of this schedule)				\$ 16,769.00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Richards

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10/6/08	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		Direct Mail	\$ 2880.46	<input type="checkbox"/>
10/3/08	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		TV Production	4878.34	<input type="checkbox"/>
10/9/08	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		TV Advertisements	4877.55	<input type="checkbox"/>
10/10/08	Republican Party of Iowa 621 East 9th Des Moines, IA 50309		Direct Mail	5760.92	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL

\$

18,397.27

TOTAL (if last

\$

page of this
schedule)

18,397.27

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule E)